



City of Wylie Employment Application
300 Country Club Rd., Wylie TX 75098
www.wylietexas.gov

Position desired (Please list only one per application.) _____

Today's Date _____

Please **neatly print or type** all information. Omissions and/or false information are cause for rejection or dismissal.

Name (Last, First, Middle)	_____	Preferred Name, if different	_____
Email Address	_____		
Address	_____	Apt #	_____
City, State, Zip	_____		
Home Telephone	_____	Alternate Phone	_____
Last four digits of SSN*	_____	Do you have a valid Texas Driver's License?	_____
Year Expires	_____		
Driver's License Number	_____	Class	_____
CDL Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
State	_____		

Have you ever filled out an employment application with the City of Wylie in the past?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Position/Title	_____	
Approximate Date	_____	
Did you receive an interview?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, with whom?	_____	
Have you ever been employed by the City of Wylie?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Position/Title	_____	
Approximate Date	_____	
Do you have any friends or relatives currently working for the City of Wylie?	<input type="checkbox"/> Friend(s)	<input type="checkbox"/> Relative(s)
No	<input type="checkbox"/>	
Name(s)	_____	
Position/Title	_____	

Diploma or GED and college transcript(s) may be required for verification of education prior to employment.				
Circle the highest grade completed:				
Grade School	High School	College	Graduate School	
1 2 3 4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4	
Type of Education	School or Agency Name and Address	Major/Minor Field Area of Study	Diploma, Degree or # of Hours	Year Degree or Diploma Obtained
High School Diploma/GED		-----		
College				
Graduate School				
Vocational or Other				

Please list any skills (including software skills, equipment operated, technical knowledge) and licenses/certifications (including the license number) that you possess that may be required or useful in performing the essential functions of the job for which you are applying.

Employment History

List **ALL** jobs (including military service) beginning with your most recent employer. Do not omit any employment, whether pertinent to the position applying for or not. **DO NOT REFERENCE RESUME.** Attach additional sheets if necessary.

Employer _____ From _____ To _____
Address _____
Telephone _____ Supervisor _____
Position _____ Ending Salary _____
Duties _____

Full time ☐ Part Time ☐
Reason for leaving _____
If still employed, may we contact this employer? _____

Employer _____ From _____ To _____
Address _____
Telephone _____ Supervisor _____
Position _____ Ending Salary _____
Duties _____

Full time ☐ Part Time ☐
Reason for leaving _____

Employer _____ From _____ To _____
Address _____
Telephone _____ Supervisor _____
Position _____ Ending Salary _____
Duties _____

Full time ☐ Part Time ☐
Reason for leaving _____

Employer _____ From _____ To _____
Address _____
Telephone _____ Supervisor _____
Position _____ Ending Salary _____
Duties _____

Full time ☐ Part Time ☐
Reason for leaving _____

Employer _____ From _____ To _____
Address _____
Telephone _____ Supervisor _____
Position _____ Ending Salary _____
Duties _____

Full time ☐ Part Time ☐
Reason for leaving _____

Have you served in the Armed Forces or National Guard of the United States? _____ Branch? _____
Dates of Service: _____ to _____ Rank at Discharge _____ Type of Discharge _____

Have you been convicted, received probation or deferred adjudication when charged with a felony? _____

If "yes", date ____/____/____ City/State _____

Charge _____ Disposition _____
(Punishment/Sentence)

Business References

Please list **only** individuals with whom you have **worked** at any position and who can attest to your work history, habits and performance.

Name _____ Relationship _____

Telephone Number(s) _____

Name _____ Relationship _____

Telephone Number(s) _____

Name _____ Relationship _____

Telephone Number(s) _____

I have reviewed the minimum qualifications for the position for which I am applying. I am aware that this application may be subject to public disclosure unless an exception under the Texas Public Information Act is applicable.

I understand and agree that my employment is "at-will" and tenure with the City of Wylie is for no definite period of time, and that wages, benefits and job conditions can be changed at any time. I also understand that any oral or written statements to the contrary are expressly disavowed and should not be relied upon by any applicant or existing employee.

I certify that the statements made by me in this application are true, complete and correct to the best of my knowledge and are made by me in good faith. I understand that any misstatement or omission of material facts in this application (or any information I have submitted) may be cause for rejection of this application or for my dismissal. I authorize investigation of my work history, driving and credit records if necessary, educational history and contact with references and previous employers. I understand that any offer of employment is contingent upon the result of a reference and background check and a post-offer medical examination and drug screen.

I hereby release, indemnify and hold harmless any government entity, employer and person furnishing or receiving records and information about me.

Applicant Signature _____ Date _____

RETURN COMPLETED APPLICATIONS TO:

Human Resources Department

City of Wylie

2000 Hwy 78N

Wylie, Texas 75098



AUTHORIZATION FOR RELEASE OF PERSONAL DATA AND
AUTHORIZATION TO CONDUCT MEDICAL EXAMINATION
AND DRUG TESTS

I, the undersigned, hereby authorize and request any present or former employer, educational institution, organization, law enforcement agency, financial institution, consumer reporting agency, or other persons having personal knowledge concerning my work record, school record, driving record, military record, reputation, financial or credit status, or criminal history to furnish the City of Wylie and/or its representatives, with any and all information in their possession regarding these matters, in connection with an application for or retention of employment. Furthermore, I hereby release from liability and hold harmless all persons, organizations, agencies or institutions supplying this information to the City of Wylie and/or its representatives. I also hereby release from liability and hold harmless the City of Wylie, Texas, relative to any documentation released to it pursuant to this Authorization. A photocopy of this Authorization is as effective as the original.

I hereby authorize the City of Wylie and its agents to conduct any medical examination they deem necessary. I hereby authorize the release to the City of Wylie all results of any medical examinations performed by any doctors or clinics to which I have been referred. This information is authorized to be used by the City of Wylie for the sole purpose of employment-related matters.

I hereby authorize the City of Wylie and its agents to conduct any urine drug tests they deem necessary. I hereby authorize the release to the City of Wylie all results of any drug tests performed by any doctors, clinics, or laboratories to which I have been referred. This information is authorized to be used by the City of Wylie for the sole purpose of employment-related matters.

Applicant's Printed Name _____
Last First Middle

Applicant's Signature _____ Date _____

PARENT OR GUARDIAN SIGNATURE _____
(If applicant is under age 18)

An Equal Opportunity Employer



EMPLOYMENT STATISTICS INFORMATION

NAME: _____ DATE: _____

POSITION(S) APPLYING FOR: _____
(Do not list "open" or "any". You must enter a position currently posted.)

It is the policy of the City of Wylie not to discriminate in its employment or personnel practices on the basis of race, color, sex, religion, generic information, national origin, age, or disability. This information is being collected for the purpose of reporting to Federal and Equal Employment Opportunity Agencies and will NOT be considered as part of the application for employment, sent to the hiring supervisor or affect the selection decision. Providing this information is voluntary.

Birth date: ____ / ____ / ____

City of Current Residence: _____

Check the Appropriate Response:

1. Gender ☐ Male ☐ Female

2. Ethnicity: ☐ White ☐ Black ☐ Hispanic ☐ American Indian or Alaskan Native
 ☐ Asian or Pacific Islander ☐ Other _____

3. Military Reserve or Veteran: ☐ Yes ☐ No

How did you learn about this position? (Check one.)

- ☐ City of Wylie Website
- ☐ TML Job Website
- ☐ Professional Organization Site
- ☐ Recruiting Agency
- ☐ Friend
- ☐ City of Wylie Employee
- ☐ Walk-in
- ☐ City of Wylie Job Hot Line
- ☐ Print Ad
- ☐ Other (Please specify.)

Website Name: _____

Agency Name: _____

Name: _____

Employee Name: _____

Name of Paper or Journal: _____

Applicant Signature: _____